UNITED STATES SECURITIES AND EXCHANGE COMMISSIÓN

Washington, DC 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

2006 FINANCIAI

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Wilkinson/Lakewood LLC Offering of Limited Liability Company Membership Interests Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [] Section 4(6) []ULOE [X] Rule 506 Type of Filing: [x] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA



1. Enter the information requested about the issuer

Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.)

Wilkinson/Lakewood LLC

Address of Executive Offices (Number and Street, City, State, Zip Code) 1309 Union Road, Gastonia, NC 28054

Telephone Number (Including Area Code)

(704) 864-1900

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

[] limited partnership, already formed

Brief Description of Business

Real property investment

Type of Business Organization

[] corporation

[] business trust [] limited partnership, to be formed [X] other (please specify):

Limited Liability Company

Month Year

Actual or Estimated Date of Incorporation or Organization:

[0][5] [0][4] [X] Actual [] Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction) [N][C]

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | [X] Promoter | [X] Beneficial Owner | [] Executive Officer | [] Director | [X] General and/or Managing Partner |
|---|------------------|---|--|---------------------------------------|--|
| Full Name (Last name first, i | | | a ta a t | | |
| Business or Residence Addr 1309 Union Road, Ga | | | Code) | 99.189. A | |
| Check Box(es) that Apply: | [X] Promoter | [X] Beneficial Owner | [] Executive Officer | [] Director | [X] General and/or Managing Partner |
| Full Name (Last name first, i | | uch Property-Inve | estments LLC | | |
| Business or Residence Adda 1309 Union Road, Ga | • | | Code) | | |
| Check Box(es) that Apply: | [] Promoter | [] Beneficial Owner | [] Executive Officer | [] Director | [] General and/or Managing Partner |
| Full Name (Last name first, i | if individual) | *************************************** | | | |
| Business or Residence Add | ress (Number and | d Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | [] Promoter | [] Beneficial Owner | [] Executive Officer | [] Director | [] General and/or Managing Partner |
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | | | | | Yes No [] [X |
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| ndividual? | | | | | | | | Yes No | | | | |
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| Busine Boule | ss or Resivard, Gas | idence Ad tonia, NC | dress (Νι 28054 | umber and | d Street, C | ity, State, a | Zip Code) C | Capital Gua | rdian LLC, | 1209 East | Garrison | |
| Name | of Associa | ated Broke | er or Deal | er Capita | l Guardia | ı LLÇ | | | | | | |
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction

is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt\$ 0 Equity \$ 0 \$_0 [] Common [] Preferred \$ 0 \$<u>0</u> \$ 675,000 \$ 675,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases \$ 675,000 Accredited Investors Non-accredited Investors..... 0 \$ 0 \$ N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of Security Type of offering Sold N/A N/A N/A N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Legal Fees [X] \$ 40.000 20,000 17,500 200,000 Other Expenses (identify): title and liability insurance, surveys, appraisal, origination fee, closing costs, manager overhead, property maintenance costs, property taxes, wetland study, reserves and building 332,500 removal costs and administrative fee..... 610,000 b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the 2,565,000 issuer."

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

| | Payments to Officers. | |
|--|----------------------------|---------------------------------|
| | Directors, & Affiliates | Payments To Others |
| Salaries and fees | | []\$ |
| Purchase of real estate | []\$ | [X] \$ 2,565,000 |
| Purchase, rental or leasing and installation of machinery | | ٠ |
| and equipment | []\$ | []\$ |
| Construction or leasing of plant buildings and facilities | []\$ | . []\$ |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer | | |
| pursuant to a merger) | | |
| Repayment of indebtedness | []\$ | []\$ |
| Working capital | []\$ | []\$ |
| | []\$ | []\$ |
| | []\$ | [X]\$ <u>2,565,000</u> |
| Total Payments Listed (column totals added) | [X] \$ <u>:</u> | 2 <u>,565,000</u> |

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

| Issuer (Print or Type) | Signature | Date |
|--------------------------------|---|--------------------|
| Wilkinson/Lakewood LLC | Max auch | 9-12-06 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | |
| Marshall A. Rauch | Manager, Rauch Property-Investments L Issuer | LC, Manager of the |

| ATTENTION |
|--|
| Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 |
| U.S.C. 1001.) |

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature | Date |
|--------------------------------|---|---------------------|
| Wilkinson/Lakewood LLC | Muxeeu | |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | |
| Marshall A. Rauch | Manager, Rauch Property-Investments I Issuer | LLC, Manager of the |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | 2 Intend to | | 3 Type of security | | 5 Disqualification under State ULOE | | | | |
|-----------|--|------------|--------------------|--------------------------|---|--|--------|---|---|
| | to non- and aggregate offering price investors in State (Part B-Item 1) | | | am | (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | | |
| | Annual Control of the | | | Number of Number of Non- | | | | | |
| State | Yes | No | LLC Interests | Accredited Investors | Amount | Accredited Investors | Amount | Yes | No |
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